

## WASTEWATER EVALUATION DATA SHEET

Permittee Name:\_\_\_\_\_ County:\_\_\_\_\_ Region:\_\_\_\_\_

System/Facility Name:\_\_\_\_\_System/Facility ID: \_\_\_\_\_

Evaluation Date/Time:\_\_\_\_\_ Evaluation Type: ☐ Phone ☐ On Site ☐ E-mail

Lead Evaluator (Team Lead) Name:\_\_\_\_\_Affiliation: ☐ TCEQ ☐ EPA ☐ START

1. Was a system POC available? ☐ Yes ☐ No POC Name:\_\_\_\_\_Contact #:\_\_\_\_\_

2. Characterize the extent of damage to the system/facility and surrounding area:

☐ N/A ☐ Minor ☐ Major ☐ Destroyed

3. What is the electrical power status?

☐ On Grid ☐ On Generator ☐ No Grid-No Generator (offline) ☐ Part Grid-Part Generator

4. Is wastewater treatment plant (WWTP) fully operational?

☐ Yes ☐ No ☐ Unknown

5. What is preventing the WWTP from being fully operational? (Describe in comments)

☐ N/A ☐ Disinfection/treatment issues  
☐ The basins/other structures were damaged  
☐ The generator(s) or bypass pump(s) is not working or is out of fuel  
☐ WWTP on Generator power. once grid restored, system will be fully operational

6. Current WWTP Operational Status:

☐ OKT ☐ DES ☐ GT ☐ GPTD ☐ NOTD ☐ NOTND ☐ Site ☐ Out ☐ Unknown

7. Is the facility bypassing treatment/disinfection? (describe length and time in comments)

☐ Yes ☐ No ☐ Unknown

8. Is the collection system fully operational?

☐ Yes ☐ No ☐ Unknown

9. If collection system is not fully operational, why? (Describe in comments)
- ☐ N/A ☐ Lift stations are damaged
  - ☐ Collection system damage
  - ☐ The generator(s) or bypass pump(s) is not working or is out of fuel
  - ☐ Collection system on Generator power. Once grid restored, system will be fully operational
10. Current Collection System Operational Status:
- ☐ OKC ☐ DES ☐ GC ☐ GPC ☐ NOCSSO ☐ NOCNSSO ☐ Site ☐ Out ☐ Unknown
11. Is/did the facility experience overflows in the collection system? (describe length and extent in comments)
- ☐ Yes ☐ No ☐ Unknown
12. Is follow-up needed?
- ☐ No ☐ 1 Week ☐ 2 Weeks ☐ > 2 Weeks
13. Estimated time frame to restore system/facility to “fully operational” status?
- ☐ N/A ☐ Hours ☐ Days ☐ Weeks ☐ Months ☐ Unknown
14. Current Overall Operational Status:
- ☐ OK ☐ DES ☐ OpGen ☐ POp ☐ NonOp/InOP ☐ Site ☐ Out ☐ Unknown
15. Are you in need of any type of chemical for the WWTP to be operational?
- ☐ Yes ☐ No ☐ Unknown
- If Yes**
- ☐ what type of chemical (ex. Chlorine, Alum, Iron, Bleach, Acid, Base) ☐ Unknown
  - ☐ is your chemical supply enough to sustain operation? How many days or month supply do you have on hand?

**LIST DETAILS FROM THIS QUESTION IN THE COMMENTS SECTION**

**COMMENTS:**